

**SENIOR HOUSING ADMISSION AND CONTINUED OCCUPANCY  
POLICIES AND PROCEDURES**

**FAIRFAX COUNTY DEPARTMENT OF  
HOUSING AND COMMUNITY DEVELOPMENT**

**Property Management Division**

**April 2015**



## **I. ADMISSIONS AND CONTINUED OCCUPANCY POLICY OBJECTIVES**

To match the housing needs of low income elderly adults with available FCRHA resources. Specifically, the FCRHA Admission and Occupancy Policy attempts to:

1. Ensure that eligible applicants are selected to occupy vacant FCRHA housing units;
2. Provide new tenants with adequate orientation so that the transition from applicant to tenant is attained smoothly;
3. Determine the continued occupancy status of tenants; and,
4. Ensure that the relationship between residents and the FCRHA is clearly defined.

## **II. FAIR HOUSING, CIVIL RIGHTS, AND NONDISCRIMINATION REQUIREMENTS**

It is the policy of the FCRHA and its managing agents to fully comply with all Federal, State and local nondiscrimination laws. The policy stated herein conforms with the objectives of the United States Housing Act of 1937, as amended, and the Quality Housing and Work Responsibility Act of 1998; Title VI of the Civil Rights Act of 1964; the Americans with Disabilities Act; and the U.S. Department of Housing and Urban Development (HUD) regulations and requirements pursuant thereto governing Fair Housing and Equal Opportunity. If there is any conflict between this policy and laws or regulations, the laws and regulations will prevail.

No person shall, on the grounds of race, color, sex, age, religion, national or ethnic origin, familial status (families with children under the age of 18), or disability be excluded from participation in, be denied the benefits of, or be otherwise subjected to discrimination under the FCRHA's programs.

## **III. REASONABLE ACCOMMODATION**

The Fairfax County Redevelopment and Housing Authority's (FCRHA) objective is to make persons with disabilities aware of their right to request a reasonable accommodation in a housing program's rules, policies, practices or services, or a reasonable modification in a housing unit or its associated premises (modifications to a unit or its associated premises applicable only to programs where the FCRHA owns the property) when such an accommodation/modification may be necessary in order for a person to comply with the requirements of the program and have an equal opportunity within the program to use and enjoy his/her unit and its associated premises.

Every effort must be made to respond in a timely fashion with a decision on all reasonable accommodation requests and appeals and document all efforts recorded and maintained by the Reasonable Accommodation Officer.

## **IV. SERVICES FOR NON-ENGLISH SPEAKING APPLICANTS AND RESIDENTS**

Applicants and residents are encouraged to provide their own interpreter. If an applicant is unable to provide an interpreter, they may request one, five business days in advance and one will be arranged. Efforts will be made to obtain a sign language interpreter, bilingual staff or access to people who speak languages other than English in order to assist non-English speaking families, (Executive Order 11063).

## **V. RIGHT TO PRIVACY AND CONFIDENTIALITY OF RECORDS**

Any request for applicant or tenant information will not be released unless there is a signed request for the release of information from the applicant or tenant. Said release is to be in the resident file. If the requestor for the information has a signed release of information form, it is to be transmitted by facsimile, mail or received by hand prior to releasing the information.

If any applicant or resident fails to sign a consent form essential to coordinating services and/or determining eligibility for senior housing, the applicant and/or resident may be denied admission to the program or their program participation will be terminated.

## **VI. DEFINITIONS OF TERMS**

**Accessible:** When used in respect to the design, construction, or alteration of Housing and Non-Housing programs, "accessible" means that the program or portion of the program when designed, constructed, altered or adapted, can be approached, entered, and used by individuals who use wheelchairs or are mobility impaired. A program that is designed, constructed, altered or adapted to be in compliance with the Uniform Federal Accessibility Standards (UFAS), 24 CFR Section 8.3 and 8.32, Appendix A to 24 CFR Section 40, and where applicable, the Americans with Disabilities Act Standards for Accessible Design (ADA Standards), Appendix A. to 28 CFR Section 36, meets the minimum standards for compliance and is accessible.

**Admission.** The effective date of the first lease/signed residency agreement for a resident/family.

**Allowances:** Amounts deducted from the household's annual income in determining adjusted annual income (the income amount used in the rent calculation). Allowances are given for elderly/disabled/handicapped families, dependents, medical expenses for elderly families and disability expenses. Other allowances may be given at the discretion of the FCRHA.

**Applicant:** A person or family that has applied for admission to a program but is not yet a participant in the program. (24 CFR 5.403)

**Assets:** The value of all equity in real estate; bank accounts; stocks and bonds; whole life insurance, and other forms of Capital Investment. The difference between the consideration received and the value of any assets disposed of for less than fair market value (but not from foreclosure or bankruptcy) during the two years preceding the application or recertification date. The value of necessary items such as furniture and automobiles shall be excluded, as well as, trust funds still held in trust.

**Certification:** The examination of a household's income, expenses, and family composition to determine the applicant family's initial eligibility for program participation and to calculate the family's share of rent.

**Citizen:** A citizen or national of the United States. (24 CFR 5.504(b))

**Disabled Person:** A person who is not solely disabled due to an addiction, is defined in Section 223 of the Social Security Act (42 U.S.C. 423); in Section 102(7) of the Developmental Disabilities Services and Facilities Construction Amendments of 1970 (42 U.S.C. 6001(7)) or is handicapped as defined in this section.

Section 223 of the Social Security Act defines disability as:

- A. Inability to engage in any substantial gainful activity by reason of any medically determinable physical or mental impairment which can be expected to result in death or which has lasted or can be expected to last for a continuous period of not less than 12 months; or

Attachment G  
RFP2000001684

- B. In the case of an individual who has attained the age of 55 and is blind (within the meaning of "blindness" as defined in Section 416(i)(I) of this title), and unable by reason of such blindness to engage in substantial, gainful activity requiring skills or abilities comparable to those of any gainful activity in which he has previously engaged with some regularity and over a substantial period of time.
- C. Section 102(7) of the Development Disabilities Services and Facilities Construction Amendments of 1970 (42 U.S.C. 6001(7)) defines disability as:
- "... a disability attributable to mental retardation, cerebral palsy, epilepsy, or another neurological condition of an individual found by the Secretary (of Health, Education and Welfare) to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals, which disability originates before such individual attains age of eighteen, which has continued or can be expected to continue indefinitely, and which constitutes a substantial handicap to such individual."
- D. The Fair Housing Act (definition is found at 24 CFR 100.201, Section 504 (definition is found at 24 CFR §8.3), and the Americans with Disabilities Act (definition is found at 24 CFR §35.104) defined disability practically the same way. A person with a disability is any person who:
- i. Has a physical or mental impairment that substantially limits one or more major life activities (means functions such as caring for one's self, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning and working);
  - ii. Has a record of such impairment (means has a history of, or has been misclassified as having, a mental or physical impairment that substantially limits one or more major life activities);
  - iii. Is regarded as having such impairment (means as having a physical or mental impairment that does not substantially limit one or more major life activities but is treated by a recipient as constituting such a limitation; has none of the impairments defined in this section but is treated by a recipient as having such an impairment; or has a physical or mental impairment that substantially limits one or more major life activities, only as a result of the attitudes of others toward that impairment).
- E. No individual shall be considered a person with disabilities, for purpose of eligibility for low-income housing under this title, solely on the basis of any drug or alcohol dependence; that includes persons who are currently using illegal drugs; persons whose alcohol use interferes with the rights of others of their peaceful enjoyment of the premises; and persons who objectively pose a direct threat or substantial risk of harm to others and that such behavior cannot be controlled with a reasonable accommodation under the FCRP Housing program.

**Elderly/Disabled/Handicapped Family:** A family whose head or spouse or whose sole member is at least 62 years of age, or 55+ and disabled (The Lincolnian only), or 55+ (Saintsbury Plaza only) as defined in this section or handicapped as defined in this section. An elderly family may include two or more elderly, disabled or handicapped persons living together who have established a stable family relationship, or else be one or more such persons living with a live-in aide/another person who is determined to be essential to his or her care and well-being (24 CFR 5.403). Families defined by this section may request a reasonable accommodation for a live-in aide or some modification to a unit that would enable them to live independently rather than in an assisted living or nursing home facility.

**Elderly Person:** A person who is at least 62 years of age. (1937 Housing Act)

Attachment G  
RFP2000001684

**Evidence of Citizenship or Eligible Immigration Status:** The Citizenship/Noncitizenship Certification Verification form must be signed by each household member. At least one adult must self verify citizenship or eligible immigration on the form, for the family to qualify for FCRP housing assistance.

**Falsified or Altered Documentation:** Verifications and documentation submitted to the FCRHA that has been falsified or altered by either the reporting agent or the applicant or the resident shall be a violation of the program regulations and can result in denial of initial eligibility or termination of continued assistance.

**Head of Household:** The adult member of the family actually looked to and held accountable for the family's needs and responsibilities and for purposes of determining income eligibility and rent. (24 CFR 5.504(b))

**Household Members:** All members of the household including family members, other than live-in aides and foster adults. This includes all household members who permanently reside in the unit, though they may be temporarily absent. All household members must be listed on the lease, and no one other than household members who are listed on the lease may reside in the unit.

**Imputed Income from Assets:** A percentage of income earned calculated on assets when they are in excess of \$5,000, based on the current passbook savings rate as determined by HUD.

**Income:** Annual Income: The income anticipated to be received from all sources by (1) the head of household and spouse, and (2) each additional member of the family residing in the household who is at least 62 years of age or older (or in some instances 55 and older, depending on program requirements) during the twelve months following admission or the re-examination of the family's income.

**Interim Re-Certification:** A re-certification of a participating family's income, expenses, and household composition conducted between the regular annual re-certifications when a change in a household's circumstances warrants such a re-certification.

**Lease:** A written agreement between the FCRHA and each resident of a dwelling unit that shall contain the provisions and obligations of each party to the other described therein.

**Lease Addendum:** Provisions and obligations that are in addition to the lease between the FCRHA and each resident of a dwelling unit.

**Lease Amendment:** A written agreement between the FCRHA and each resident of a dwelling unit that alters the terms or conditions of the initial and all subsequent leases.

**Medical Expenses:**

- (A) Those medical expenses (of all family members of an Elderly or Disabled family), including medical insurance premiums, that are anticipated during the period for which annual income is computed and that are not covered by insurance. (24 CFR 5.603(d)). Those expenses include, but are not limited to, prescription and non-prescription drugs, costs for doctors, dentists, therapists, medical care and transportation for medical purposes. The actual medical expenses for the last twelve month period are used as the expenses expected for the coming year.
- (B) The actual medical expenses for the last twelve month period can be used if it is anticipated and verified through a medical insurance company, medical supplies store, or medical facility such as a pharmacy, doctor's office, or hospital that the expenses will continue.
- (C) A medical insurance company, licensed medical store, or medical facility can establish a reasonable medical cost they anticipate will be the responsibility of the tenant for the 12 months that fall within the recertification year.

Attachment G  
RFP2000001684

- (D) Residents may provide insurance statements or prescription records in lieu of having their doctor or a medical facility verify the cost, if it is reasonable, to establish that medical costs are anticipated to be ongoing: i.e. Diabetic medication, arthritis medication and the like. A one time doctor's statement can be utilized if it can be established that the need for medication is not likely to change and therefore the costs for the medication can be assumed to be ongoing.

**Minimum Rent:** The household's monthly rent of person's residing in the Lincolnian Senior Residences may not be less than \$50 unless the family can document a hardship exemption.

**Monthly Adjusted Income:** One twelfth of adjusted annual income. (24 CFR 5.603(d))

**Monthly Income:** One twelfth of annual gross income. (24 CFR 5.603(d))

**National:** A person who owes permanent allegiance to the United States, for example, as a result of birth in a United States territory or possession. (24 CFR 5.504(b))

**Non-Citizen:** A person who is neither a citizen nor national of the United States. (24 CFR 5.504(b))

**Occupancy Standards:** The standards established for determining the appropriate number of bedrooms needed to house families of different sizes or composition.

**Personal Declaration:** A type of verification statement by the resident as to the amount and source of income, expenses, and family composition.

**Premises:** The building or complex in which the dwelling unit is located, including common areas and grounds.

**Re-certification:** The annual re-examination of a family's income, expenses, and composition to determine the family's rent and to review the suitability of the unit in which the household resides.

**Rent/Monthly fee:** The actual amount, calculated on a monthly basis, due under a lease or occupancy agreement between a resident and the resident's current landlord/owner.

**Residency Preference:** A local preference to give priority to applicants who live or work or have a *bona fide* offer of employment in Fairfax County. A secondary preference is given to individuals with immediate family residing in Fairfax County.

**Second Party Verification:** The applicant or resident can provide documents issued to them from the original source, e.g., employer pay stubs, bank statements, award letters, medical receipts, Income Tax Return, to verify income and expenses. The file must be documented as to what steps the FCRHA took to secure third party verification, but was unable to do so. Documentation submitted by the applicant or resident should be the original, not photocopies, will be reviewed for authenticity and be unaltered. Affidavits or family declarations are to be signed and notarized.

**Spouse:** The husband or wife of the head-of-household.

**Suspense File:** A pool of the completed eligible applicant files of families waiting for placement in a housing unit, kept by income, bedroom size, and date of pre-application.

**Third Party Verification:** Verification that is either written or oral confirmation of a family's income, expenses, or household composition provided by a source outside the household directly to the FCRHA.

Attachment G  
RFP2000001684

**Verification:** The documentation that must either be obtained and maintained in the case record of the following factors or must document in the files why third-party verification is not available:

- a. Reported family annual income;
- b. The value of assets;
- c. Expenses related to deductions from annual income; and
- d. Other factors that affect the determination of adjusted income or income based rent.

Prior to any recertification interview staff should initially gather information from SWICA (VEC), the Work Number, Tenant Assessment Sub-System (TASS), Department of Motor Vehicles (DMV), and credit reporting bureaus and compare the information from these sources to what the resident states on the Personal Declaration. Discrepancies are to be immediately discussed and resolved. Referrals will be made to the Compliance Unit for fraud investigations of unreported income and/or unreported residents (which can be substantiated by the United States Post Office).

## VII. ELIGIBILITY

### A. Age, Income Limits and Preference

Community/funded by	Age Criteria (all household members)	Income Limit	First Preference	Second Preference
<b>Gum Springs Glen</b> (LIHTC/HOME)	62 +	40% MSA; 50% MSA, based on unit type/size	6 units offered to qualified Gum Springs community residents; live or work in county	Family member lives in county
<b>Herndon Harbor House I</b> (LIHTC)	62+	54 units at 50% MSA; 6 units at 60% MSA	Live or work in county	Family member lives in county
<b>Herndon Harbor House II</b> (LIHTC/ HOME)	62+	12 units at 50% MSA; 48 units at 60% MSA	Live or work in county	Family member lives in county
<b>Lewinsville</b> (local funding/FCRHA/ Project base vouchers)	62+	50% MSA	Live or work in county	Family member lives in county
<b>Little River Glen</b> (local funding/FCRHA/tax exempt bonds, risk sharing, HOME, CDBG)	62+	48 units 60% MSA; 72 units at 80% MSA	Live or work in county	Family member lives in county
<b>The Lincolnian</b> (local funding/FCRHA, CDBG; project based vouchers)	62+	50% MSA	Live or work in county	Family member lives in county
<b>Morris Glen</b> (LIHTC, HOME, CDBG)	62+	28 units at 50 % MSA; 32 units at 60% MSA	Live or work in county	Family member lives in county

Attachment G  
RFP2000001684

<b>Olley Glen</b> (LIHTC, FCRHA/ Tax-exempt bonds/HOME/CDBG)	62+		Live or work in county	Family member lives in county
<b>Saintsbury Plaza</b> (local funding)	55+	70% MSA	Live or work in county	
<b>Braddock Glen ALF</b> (local funding)	62+	60% MSA	Liver or work in county	Family member lives in county
Lincolnian ALF (local funding/FCRHA, CDBG)	55+ and disabled or 62+	50% MSA	Must be a county resident	Individuals with income of \$10,830 or less

**B. Income**

Annual Income is defined as follows: Total household income from all sources of-

- (1) The head of household and qualifying spouse or senior adult member, and;
- (2) Each additional senior adult member (a person 62 years of age or older, with the exception of Saintsbury Plaza and the Lincolnian Assisted Living community where the age is 55 years or older for persons with disabilities residing in the household, anticipated to be received during the twelve (12) months following admission or re-examination of household income. Total household income shall include that portion of the income of the head of the household or spouse or qualifying senior adult member temporarily absent which is available to meet the household's needs. Total household income includes, but is not limited to, the following:
  - a. The full amount, before any payroll deductions, of wages and salaries, including compensation for overtime and other compensation for personal services (such as commissions, fees, tips and bonuses);
  - b. Net income from operation of a business or profession (expenditures for business expansion or amortization of capital indebtedness shall not be deducted to determine net income from a business);
  - c. Interest, dividends, and net income of any kind from real or personal property. In determining net family assets, include the value of any business or family assets disposed of by an applicant or a tenant for less than Fair Market Value (FMV), (including a disposition in trust, but not in a foreclosure or bankruptcy sale) during the two years preceding the date of application for the program or reexamination, as applicable, in excess of the consideration received therefore.
  - d. Where the resident owns property, real and/or personal, annual income shall include the greater of the actual income derived from the property or a percentage of the assessed value of the property based on the current passbook savings rate, (if it is valued at more than \$5,000) as determined by U.S. Department of Housing and Urban Development (HUD). If the property is not generating income and it can be shown that the resident family has placed the property on the market for sale, no interest income will be imputed. If the property is rented, it must be rented at the fair market rent as determined by the local market. If rented, it will be treated as a business. If rented at less than the fair market rent, a rent amount will be imputed based on the local market conditions.



Attachment G  
RFP2000001684

- e. The full amount received from annuities, periodic payments from insurance policies, retirement income, pensions, periodic benefits for disability or death, and other similar types of periodic receipts;
- f. Payment in lieu of earnings, such as unemployment and disability compensation, social security benefits, workmen's compensation and dismissal wages;
- g. Welfare assistance payment;
- h. Periodic and determinable allowances, such as alimony and regular contributions or regular gifts, including amounts received from any persons not residing in the dwelling; and
- i. All regular pay, special payments and allowances such as rental allowances.

(Total household income does not include temporary, non-recurring or sporadic income).

**C. Citizenship Eligibility Status**

- 1. To be eligible, at least one family member must be a citizen, national, or a non-citizen who has eligible immigration status under one of the categories set forth in the Citizenship/Non-citizenship Certification Verification form.

**D. Social Security Cards and Consent Forms**

- 1. All elderly family members must provide a Social Security number or certify that they do not have one but have applied for a Social Security card. The original/actual Social Security card, the application for a Social Security card or an identification issued by a Federal, State or local government entity or agency will be acceptable forms of certifying the Social Security number.
- 2. Signing Consent Forms
  - a. In order to be eligible, each member of the household shall sign one or more consent forms.

**VIII. TENANT SELECTION**

**A. General Application Procedure**

Application forms will be available by the facility's designated Management Agent and/or any other such sites as authorized by HCD. Prospective residents may request an application by telephone, may apply in person at the designated senior housing property sites to the managing agent or inquires may be received at other sites and referred to the managing agent or property manager. The waiting list will be maintained by date of application and priority. Completed applications from applicants of project based voucher requests will be referred to the designated HCV worker/HCD Applications Center to manage the waiting lists. .

**1. Waiting List**

- a. Applicants may apply for FCRHA Senior housing by completing a pre-application with the selected Senior housing community. This form must be completed based on current family composition, current gross income, and current place of domicile as well as current Priority Status. Applicants may self-certify their Priority Status to be placed on the elderly waiting lists. Incomplete pre-application forms will not be accepted; they will be returned

Attachment G  
RFP2000001684

to the applicant or they will be advised the pre-application will not be accepted until the missing information is supplied. Individuals under the age of 62 (or 55 where indicated) may not be placed on waiting lists until they meet age criteria.

- b. If there is a change in family composition, income, domicile, or Priority Status, the applicant must provide notice in writing. The pre-application will be noted with the written documentation. If there is a change in their Priority Status, the applicant's order on the waiting list will change. Acknowledgement of the written notice will be sent in writing to the applicant and the applicant's pre-application status updated.
- c. When a vacancy occurs, the property manager will contact applicant at the top of the waiting list. For project based voucher applicants, the Applications Center shall be contacted to obtain names of applicants on the top of the waiting list. Applicants will be contacted and shown the available unit to determine interest.

## **2. Updating the Waiting List**

If at any time an applicant's family is on the waiting list and a determination is made that the family is not eligible for assistance, the family will be removed from the waiting list. If a family is removed from the waiting list because HCD determines the family is not eligible for assistance, a notice will be sent to the family's address of record as well as to any alternate address provided on the initial application. The notice will state the reasons the family was removed from the waiting list.

## **3. Standards for Resident Selection**

- a. Nondiscriminatory policies in the assignment of applicants to dwelling units will be followed. Management shall lease to couples and individuals in accordance with the following standards:
- b. Persons with outstanding financial obligations to the FCRHA or its Management Agent will not be considered for the Fairfax County Rental Program (FCRP) until such obligations have been fully satisfied. FCRHA must be notified by Management in writing of any outstanding balances due at lease termination.
- c. Consideration shall be given to whether the conduct of the applicant in present or prior housing has interfered with other tenants in a manner which diminished his/her neighbor's enjoyment of the premises by adversely affecting their health, safety, and welfare or affected adversely the physical environment or the financial stability of the project. Relevant information respecting habits or practices to be considered may include but is not limited to:
  - 1. An applicant's past performance in meeting financial obligations, especially rent, through a credit check and rental references.
  - 2. A record of disturbance of neighbors, destruction of property, or living conditions at prior residences which may adversely affect the health, safety, or welfare of other residents.
  - 3. Applicants who do not meet the client profile or who are dangerous to self and others will not be accepted (i.e. a history of criminal activity involving crimes of physical violence to persons or property and other criminal acts which would adversely affect the health, safety, or welfare of other residents).

Attachment G  
RFP2000001684

4. Applicants who are illegally using a controlled substance or abuses alcohol in such a way that they may interfere with the health, safety, or right to peaceful enjoyment of the premises by other residents unless may be precluded from eligibility, unless:
  - a. The person has recently successfully completed a drug or alcohol rehabilitation program;
  - b. The person has otherwise been successfully rehabilitated;
  - c. The person is currently participating in a supervised drug or alcohol rehabilitation program.
5. In the event of the receipt of unfavorable information with respect to an applicant, the time, nature, and extent of the unfavorable occurrence or circumstances, as well as subsequent actions, will be considered. For example:
  - a. Evidence of rehabilitation.
  - b. Evidence of the applicant couple's or individual's participation in or willingness to participate in social service or other appropriate counseling service programs and the availability of such programs.
6. Preclude from ever attaining admission any person who is a sex offender and is subject to a lifetime registration requirement under a State sex offenders' registration program.
7. The financial ability of the applicant to meet monthly rental obligations will be considered.
8. In the event of the receipt of unfavorable information with respect to an applicant, the FCRHA shall consider the time, and extent of the applicant's conduct and factors that might indicate a reasonable probability of favorable future conduct or financial prospects. For example:
  - a. Evidence of rehabilitation having taken place in the recent past.
  - b. Evidence of the applicant family's participation in or willingness to participate in social service or other appropriate counseling service programs.
  - c. Evidence of favorable future conduct in the case of unacceptable housekeeping habits can be obtained by keeping the applicant on a suspense list for six months and reevaluating housekeeping.
9. Federal disability discrimination laws do not cover persons whose tenancy would pose a direct threat to the health or safety of others or whose tenancy would result in substantial physical damage to the property of others. However, neither Section 504 nor the Fair Housing Act allows for the exclusion of individuals based upon fear or stereotype about a particular disability or persons with disabilities in general. A determination that a person poses a direct threat must be based upon reliable objective evidence (e.g., current conduct, a recent history of overt acts).

The information should consider:

- a. The nature, duration, and severity of the risk of injury;
  - b. The probability that injury will actually occur; and
  - c. Whether there are any reasonable modifications of rules, policies, practices, procedures, or services that will reduce or eliminate the risk of a direct threat.
10. In evaluating recent history of overt acts, must consider whether the individual has received intervening treatment or medication that has reduced or eliminated the risk of a direct threat. In such a situation, the provider may request that the individual document how the circumstances have changed so that he/she no longer poses a direct threat. Must have reliable objective evidence that a person with a disability poses a direct threat before excluding him or her from housing on that basis.
  11. No applicant who has been a victim of domestic violence, dating violence, or stalking shall be denied admission into the program if he/she is otherwise qualified.
  12. The family must submit required evidence of citizenship or eligible immigration status.
  13. Applicants for Assisted Living must meet all other requirements as indicated in the Assisted Living Admissions Process and according to licensure regulations.

#### **4. Verification of Priority Status**

- a. Residency and Employment in Fairfax County – The Applicant or family member must submit proof of residency through lease, photo ID or other items at the discretion of HCD. Employment location will be established through income verification process and require verification of residency address.

#### **5. Verification Policy**

- a. Verify information provided by the applicant pertaining to their eligibility and their ability to comply with the essential elements of the lease. This will include, but will not be limited to the following:
  1. Credit check (including verification of homeownership/mortgage payments that are revealed on the credit report) of the head, spouse, co-head)
  2. Rental references for the past three years for all adult members;
  3. Criminal background checks on all adult members, including live-in aides;
  4. A check of the Commonwealth of Virginia and other States' lifetime sexual offender's registration program on each adult family member, including live-in aides. No individual registered with this program will be admitted
- b. The FCRHA may require applicants to sign a written consent form to obtain information from a drug abuse treatment facility that is solely related to whether the applicant is currently engaging in the illegal use of a controlled substance.

Attachment G  
RFP2000001684

- c. In the event that the applicant has no credit history or rental references or any other information that indicates the probability of future responsible tenancy, they may be considered for the program, if they pass the other eligibility criteria referenced in this policy.

**6. Document Review**

- a. When other, preferred methods of verification (e.g. third-party) are unavailable, the applicant or program participant may provide documents. Original authentic documents dated within the last 90 days from the date of the interview will be reviewed. (This is to insure the integrity of the document).
- b. A copy of the original document will be made and maintained in the case file. The original will be returned to the applicant or resident. The file will be documented with case notes of receipt, copy, and review of the original document and why the third-party verification was not available.

Some of the acceptable documents are:

- 1. Consecutive and original pay stubs (three or more)
- 2. Social Security Administration award letters
- 3. Bank Statements (three or more)
- 4. Pension benefit statements
- 5. Medicare prescription drug plan statements and/or prescription drug plan card with the program seal "Medicare Rx" and the words "Prescription Drug Coverage"

**9. Tenant Self- Certification**

- a. The applicant or program participant submits an affidavit or a notarized statement of reported income and/or expenses.
- b. This verification method should be used as a last resort when no other verification methods are possible. If this method of verification is used, the file must be documented with case notes as to why third-party verification did not occur.

**10. Exceptions to the Third-Party Verification Requirements**

- a. Staff have made at least two documented attempts to obtain third-party verification of income and there has been no response; or
- b. An independent source cannot send written third-party verification directly to the FCRHA (e.g. Company policy limits information to dates of employment or prohibits the release of information);
- c. In the case of assets or expenses, the item to be verified is not of a significant amount and would have minimum impact on the total tenant payment, and the information can be verified through review of original authentic documents that have been provided by the applicant or program participant; or
- d. If is not cost effective or reasonable to obtain third-party verification of assets or expenses.

**11. General Verification Information**

- a. All verifications must be documented in the case file and must be kept for audit review.

Attachment G  
RFP2000001684

- b. If verifications are more than 90 days old before lease-up, new written verifications must be obtained.
- c. Verifications obtained at recertification must not be more than 90 days old on the effective date of the recertification.
- d. Time limits do not apply to information that does not need to be re-verified: age, birth certificates to show family membership, most disabilities, etc.
- e. Family composition and income should be reconfirmed at lease up.

**12. Grounds for Denial**

FCRHA is neither required nor obligated to assist applicants who:

- a. Do not meet any one or more of the aforementioned eligibility criteria;
- b. Do not supply information or documentation, e.g., Social Security cards and/or numbers, required by the application process;
- c. Have failed to respond to a written request for information or a request to declare their continued interest in the program;
- d. Do not have the ability to maintain (without assistance) their housing in a decent, safe, sanitary condition and in good repair where such habits could adversely affect the health, safety or welfare of other tenants;
- e. Have committed fraud, bribery or any other act of corruption in connection with any Federal housing assistance program, including the intentional misrepresentation of information related to their housing application or benefits derived there from;
- f. Were evicted from any Federally assisted housing program within the past three years because of drug related criminal activity involving the illegal manufacture, sale, distribution, or possession with the intent to manufacture, sell, distribute a controlled substance as defined in Section 102 of the Controlled Substances Act, 21 USC 802;
- g. Have engaged in or threatened abusive or violent behavior towards any FCRHA/HCD staff, managing agent or residents;
- h. Have any member of the household who has been evicted from public housing or the Housing Choice Voucher program (formerly Section 8 Certificate or Voucher programs), or Rental Assistance Programs;
- i. **Denied for Life:** If any family member has manufactured or produced or has been convicted of manufacturing or producing methamphetamine in a public housing development or in a Housing Choice Voucher program(formerly Section 8) either tenant based assistance for project based assistance.
- j. **Denied for Life:** Has a lifetime registration requirement under a State sex offender registration program.
- k. The family does not provide complete and true information.

**9. Informal Review**

If an applicant is determined to be ineligible for admission, provide written notice of this determination; however applicants will not be provided an informal review on this determination; unless there is a reasonable accommodation request due to a disability.

**10. The One Unit Offer Plan**

- a. An applicant will be shown an available unit and will be given one business day to either accept or reject the offer. Refusal of a suitable offer without a valid reason will result in the applicant's name being removed from the waiting list.
- b. If an applicant is willing to accept the unit offered but is unable to move at the time of the offer and presents clear evidence of the following the applicant will not be removed from the waiting list:
  1. Unable to move at that time, i.e. under an annual lease; or
  2. Would impose an undue hardship; or
  3. Would create a hardship that is not related to consideration of race, color, or national origin, such as inaccessibility to source of employment and special medical services.
- c. Refusal of a second offer which has taken into consideration the applicant's special needs will result in the applicant's name being removed from the waiting list.

**11. Occupancy Standard for Senior Congregate Housing**

- a. As a general guide, assignment of families to bedroom sizes shall be no more than two persons per bedroom except when maximum utilization of the total housing unit would permit more than 2 persons per bedroom without promoting overcrowding or any code violation. Furthermore, medical needs, along with other specific family circumstances, may be used to deviate from any guidelines.

Number of Bedrooms	Number of Persons	
	Minimum	Maximum
0	1	2
1	1	2
2	2	4

**IX. LEASING OF DWELLING UNITS**

**A. Lease Agreement**

Each lease shall be made by and between the resident and the FCRHA. Each lease agreement shall be signed by each adult member of the household and the FCRHA or its authorized Management Agent prior to lease up or admission.

**B. Transfers**

If a resident transfers from one dwelling unit to another, a new lease shall be executed for the new dwelling unit to be occupied.

**C. Lease Amendments**

If at any time during the tenure of a lease agreement, a change in the household's status requires an amendment to any provision of the lease, an appropriate amendment shall be prepared and made a part of the existing lease. All copies of such amendments are to be dated and signed by both parties.

**D. Accommodation of Persons with Disabilities**

For all aspects of the lease and grievance procedures, a disabled person shall be offered have the right to request a reasonable accommodation to the extent necessary to provide the disabled person with an opportunity to use and occupy the dwelling unit equal to a non-disabled person.

**E. Security Deposit/Community Fee**

1. The security deposits shall be collected at lease up. Such security deposit will bear an interest rate in accordance with applicable state law. At the end of tenancy, the security deposit along with earned interest will be refunded the tenant less any charges for damages to the unit which exceeds normal wear and tear and any outstanding rent, excess utility charges, maintenance charges, late fees, etc. Residents will be advised of these charges in writing.
2. Braddock Glen and the Lincolnia Assisted Living communities charge a nominal one time non-refundable community fee to residents only at admission. Lincolnia ALF residents receiving auxiliary grant funding are exempt from paying the community fee.

**X. ELIGIBILITY FOR CONTINUED OCCUPANCY**

Only those occupants who qualify as a family or are the remaining member(s) of a resident family will be considered eligible for continued occupancy.

**A. Annual Re-Examinations of Resident Continuing Eligibility**

Annual re-examination is the process used to determine a resident household's continuing occupancy and total resident rental payments in the FCRP program. A resident's household anticipated annual income will be used as the basis for determining monthly rent payments. The re-examination policy is:

The status of each family is to be re-examined annually. Residents on contract rents and benefiting from a tax credit, HOMES or HCV Project-based properties will be re-examined annually in compliance with HCV or Low Income Housing Tax Credit regulations issued by the I.R.S.

1. Annual re-examinations will be effective the first day of the anniversary month in which the resident was admitted. Included in the process will be:
  - a . Verification of or self-declaration of all sources of income and assets.
  - b . Verification of medical expenses, if applicable.



3. Each resident is to be notified in writing of any change in the rent or unit occupied and of any misrepresentation of lease violation revealed by the re-examination and the corrective action to be taken.

#### **B. Special Reexaminations**

If it is not possible at the time of admission or during the annual re-examination to determine the household's annual income with any reasonable degree of accuracy, a temporary determination of income and rent is to be made and a special reexamination should be scheduled within 30, 60, or 90 days, depending upon the resident's circumstances. The resident is to be notified in writing of the date of the special reexamination and the anticipated effective date of the rent change.

#### **C. Interim Re-Examinations**

Interim re-examinations may be requested by a resident when the resident experiences a change in the household income or composition.

All changes in family composition or income must be reported by the resident in writing within 10 days of the change. Notify the household of receipt of their request within 10 days, and the date of the scheduled appointment for an interim re-examination interview. The interview will be conducted within 10 days of the mailing of the appointment letter. If the reported loss of the whole household's income is determined to be 10 percent or greater and is not of a temporary nature (less than 30 days duration), these changes will result in an interim re-examination to decrease the household rent, if applicable. Such changes will be considered under the following conditions, which include, but are not limited to:

- d. Accident or illness (more than 30 days duration);
1. Loss of employment;
2. A household member is leaving or has left the unit, e.g., death or separation or divorce;

Increases in household income will be reviewed at:

1. Annual re-examination;
2. Special re-examination; and
3. When changes in family composition occur.

#### **D. Senior Housing Exemption**

Although the Federal Housing Act was amended in 1988 to prohibit discrimination on the basis of disability and familial status, Congress intended to preserve housing specifically designed to meet the needs of senior citizens. Housing that meets the FHA definition of "housing for older persons" is therefore exempt from the law's familial status requirements provided that:

1. HUD has determined that the dwelling is specifically designed for and occupied by elderly persons under a Federal, State or local government program; or
2. It is occupied solely by persons who are 62 or older; or

3. It houses at least one person who is 55 or older in at least 80 of the occupied units, and adheres to a policy that demonstrates intent to house persons who are 55 or older.

## **XI. PET POLICY**

### **A. Policy Requirements**

The FCRHA's policy on pet ownership in FCRP Elderly housing permits a resident to own one pet while a resident in a FCRP Elderly housing unit. The resident must maintain the pet in the FCRP Elderly community subject to the FCRHA's requirements.

## **XII. TERMINATION OF THE LEASE**

### **A. Termination of Lease**

The FCRHA, its authorized agent, or the resident may terminate the lease in accordance with the terms of the lease by giving written notice as prescribed in the lease but no later than 30 days notice. The lease may be terminated for any reason. Residents who fail to comply with the provision of the lease regarding rent, miscellaneous charges or other lease obligations will be subject to lease termination and/or judicial proceedings.

The FCRHA or the resident may cancel the lease at any time during the term of the lease pursuant to the provisions contained in the lease by giving the written notice prescribed in the lease. The FCRHA may terminate the lease only on the basis of the grounds set forth in the lease.

Where it becomes necessary to evict a resident, the FCRHA eviction shall be in accordance with the Virginia Residential Landlord-Tenant Act, as amended. Persons with outstanding obligations to the FCRHA or its Management Agent after termination of the lease will not be considered for other FCRHA rental housing assistance until such obligations have been fully satisfied. The FCRHA's Management Agents will notify HCD in writing of all outstanding balances at termination of a lease.

There is no limitation on the ability of HCD to terminate assistance for other good cause unrelated to the incident or incidents of domestic violence, dating violence or stalking, other than the victim may not be subject to a "more demanding standard" than non-victims. There is no prohibition on HCD terminating assistance if it "can demonstrate an actual and imminent threat to other tenants or those employed at or providing service to the property if that tenant's (victim's) assistance is not terminated." Any protections provided by law which give greater protection to the victim are not superseded by these provisions. HCD may require certification by the victim of victim status on such forms as HCD and/or HUD shall prescribe and approve.

### **B. Termination of Individuals who Manufactured or Produced Methamphetamine on the Premises**

The FCRHA will immediately and permanently terminate the tenancy any person who manufactures or produces methamphetamine in any FCRHA housing unit or on any part of the FCRHA housing premises because such criminal behavior is in violation of Federal or State law.

**C. Termination of Over-Income Households (24 CFR 960.261)**

Households whose total household income is above 100% AMI adjusted for family size will be notified their tenancy will be terminated. Unless required to do so by local law, the FCRHA will not terminate a household solely because the household is over the income limit for FCRHA housing.

**D. Number of Allowable Late Rent Payments**

Frequent late payment of rent is a lease violation that can result in eviction. Residents who are three (3) or more times late within a calendar year (January-December) will be issued a 30 day written notice to vacate.

**E. Appeals**

FCRP properties, including senior housing properties do not offer an appeals process. HCD has determined that the local judicial proceedings include due process; therefore the tenant's rights to judicial review are not abridged by denying the administrative grievance procedures. Where it becomes necessary to evict a resident, the FCRHA Eviction Procedures shall be followed.